PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

•	,	CLAIMS AS	S FILED - (Column		(Column 2)			SMALL ENTITY TYPE		ΩR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			5 7					TE]	RATE	FEE
FOR			NUMBER FILED		NUMB	NUMBER EXTRA		C FEE	V / -	OR	BASIC FEE	· 710.00
TOTAL CHARGEABLE CLAIMS			\$7 minus 20=		.37		X\$	9=	333	OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		* 4		-	0=	160	1	X80=	
MULTIPLE DEPENDENT CLAIM P			RESENT				-		700	OR		
* If	the difference	in column 1 is	less than ze	ero, enter	r "0" in c	"0" in column 2		35=	11.7	OR	+270=	1.7
* If the difference in column 1 is less than zero, enter "0" in column 2 CLAIMS AS AMENDED - PART II							OT	TAL	843	OR	TOTAL	
		(Column 1)	1171 E 1 7 E E	(Colur	mn 2)	(Column 3)	SM	SMALL ENTITY			OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID	BER OUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
	Independent	*	Minus	***		=	X4	0=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							.+13	5=		OR	+270=	
								OTAL FEE			TOTAL ADDIT. FEE	
		(Column 1)		(Colun		(Column 3)	700,,	. 1			ADDII. FEL	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA	RA	ΓΕ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
	Independent	NTATION OF MI	Minus	***	CLAIM	=	X40)=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								5=		OR	+270=	
								TAL FEE		OR ,	TOTAL ADDIT. FEE	
-		(Column 1) CLAIMS		(Colum		(Column 3)						
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	**		=	X\$:	9=		OR	X\$18=	
	Independent	*	Minus	***	. 21 2124	=	X40)=		OR	X80=	
	FIRST PRESE	NTATION OF MU	JUIPLE DEP	ENDENT	CLAIM		.10	_		j		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											+270= TOTAL	
***	If the "Highest Nur	mber Previously Pa mber Previously Pa ber Previously Paid	aid For" IN THIS	S SPACE is	s less than	n 3. enter "3 "	ADDIT.	FEE			ADDIT. FEE	
	The Thighest Hulli	Del Freviously Fall	TO (TOTAL OF	maepenae	my is me	nignest number	tound in th	ıе арр	ropriate box	in colu	umn 1.	